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CONFIRMATION NO. 6536

<b>SERIAL NUMBER</b> 10/696,310	<b>FILING OR 371(c) DATE</b> 10/29/2003 <b>RULE</b>	<b>CLASS</b> 379	<b>GROUP ART UNIT</b> 2614	<b>ATTORNEY DOCKET NO.</b> D3049	
<b>APPLICANTS</b> David Beryl Lazarus, Elkins Park, PA; <b>** CONTINUING DATA *****</b> <i>none QN</i> <b>** FOREIGN APPLICATIONS *****</b> <i>none QN</i> <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 01/28/2004</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <i>an</i> Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> PA	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 21	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 000043471					
<b>TITLE</b> INSTRUCTIVE OUT-OF-SERVICE TELEPHONE LINES					
<b>FILING FEE RECEIVED</b> 788	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		